

**CLINICAL PRIORITIES ADVISORY GROUP**  
**04 June 2019**

<b>Agenda Item No</b>	03.3
<b>National Programme</b>	Cancer
<b>Clinical Reference Group</b>	Radiotherapy
<b>URN</b>	1873

<b>Title</b>
Proton Beam Therapy for Head and Neck Cancer in Adults

<b>Actions Requested</b>	1. Agree the policy proposition
	2. Recommend adoption as an in-year service development

<b>Proposition</b>
<p>This policy statement recommends that proton beam therapy (PBT), a form of radiotherapy, should not be made routinely available for the treatment of head and neck cancer in adults.</p> <p>This treatment is not currently available in this indication and therefore does not alter the current commissioning position. On review of the available clinical evidence, Clinical Panel deemed that the clinical benefits of the treatment were uncertain for this population and recommended a not for routine commissioning policy statement be developed.</p>

<b>Clinical Panel recommendation</b>
The Clinical Panel recommended that the policy progress as a not for routine commissioning policy.

<b>The committee is asked to receive the following assurance:</b>	
1.	The Head of Clinical Effectiveness confirms the proposal has completed the appropriate sequence of governance steps and includes an: Evidence Review; Clinical Panel Report.
2.	The Head of Acute Programmes / Head of Mental Health Programme confirms the proposal is supported by an: Impact Assessment; Stakeholder Engagement Report; Consultation Report; Equality Impact and Assessment Report; Clinical Policy Proposition. The relevant National Programme of Care Board has approved these reports.

3.	The Director of Finance (Specialised Commissioning) confirms that the impact assessment has reasonably estimated a) the incremental cost and b) the budget impact of the proposal.
4.	The Clinical Programmes Director (Specialised Commissioning) confirms that the service and operational impacts have been completed.

<b>The following documents are included (others available on request):</b>	
1.	Clinical Policy Proposition
2.	Engagement Report
3.	Evidence Summary
4.	Clinical Panel Report
5.	Equality Impact and Assessment Report

No	Outcome measures	Summary from evidence review
1.	Survival	Not measured
2.	Progression free survival	Not measured
3.	Mobility	Not measured
4.	Self-care	Not measured
5.	Usual activities	Not measured
6.	Pain	Not measured
7.	Anxiety / Depression	Not measured
8.	Replacement of more toxic treatment	<p>The review assessed whether there was a significant difference in the severity of the symptoms patients experienced whilst being treated with chemotherapy and proton beam therapy or chemotherapy and photon radiotherapy, with a median follow up duration of 7.7 months.</p> <p>No differences in symptom burden were detected between treatment modalities during the acute and chronic phases when the patients' responses were analysed by the top 11 most severe symptoms - food taste, dry mouth, swallowing and chewing, fatigue, pain, appetite, mucus, sleep, mouth sores, drowsiness and distress. A difference, though not statistically significant was recorded amongst the patients in the subacute recovery phase with the proton therapy patients recording a lower symptom burden.</p>
9.	Dependency on care giver /	Not measured

	supporting independence	
10.	Safety	Not measured
11.	Delivery of intervention	Not measured

<b>Considerations from review by Rare Disease Advisory Group</b>
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Not applicable.
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<b>Pharmaceutical considerations</b>
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Not applicable.
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<b>Considerations from review by National Programme of Care</b>
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1) The proposal received the full support of the Cancer PoC Board on the 18 <sup>th</sup> April 2019.
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